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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR	Attorney Docket Number	END-5314			
	First Named Inventor	T. Douglas Mast			
	COMPLETE IF KNOWN				
	Application Number	10/825,090			
	Filing Date	April 15, 2004			
	Group Art Unit	3737			
	Examiner Name				
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: ULTRASOUND MEDICAL TREATMENT SYSTEM AND METHOD <i>(Title of the Invention)</i>					
the specification of which <input type="checkbox"/> is attached hereto OR <input checked="" type="checkbox"/> was filed on (MM/DD/YYYY) April 15, 2004 as United States Application Number or PCT International Application Number 10/825,090 and was amended on (MM/DD/YYYY) <input type="text"/>					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					



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Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer
Number Bar Code
Label Here

AND

☒ Practitioner(s) named below:

Name
Douglas Erickson,
Mark Levy

Registration Number
29, 530
27, 922

C/O Thompson Hine, LLP
2900 Courthouse Plaza NE
PO Box 8801
Dayton, Ohio 45401-8801
Tel 937-443-6600

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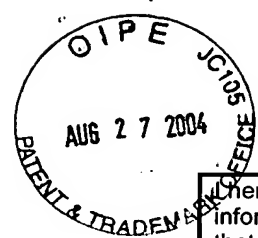
State:

ZIP

Country

Telephone:

Fax: (513) 337-8489



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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) T. Douglas

Family Name
or Surname Mast

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 3907 Lansdowne Avenue

City Cincinnati

State OH

ZIP 45236

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Waseem

Family Name
or Surname Faidi

Inventor's
Signature

Date

Residence: City Clifton Park

State NY

Country USA

Citizenship Jordan

Mailing Address 702 Solomon Avenue

City Clifton Park

State NY

ZIP 12065

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Inder Raj S.

Family Name
or Surname Makin

Inventor's
Signature

Date

Residence: City Loveland

State OH

Country USA

Citizenship USA

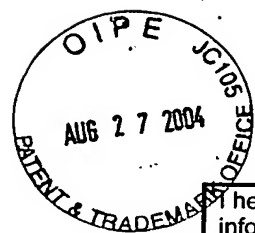
Mailing Address 11388 Donwiddle Drive

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State OH

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Country USA



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NAME OF FOURTH INVENTOR:

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Given Name
(first and middle [if any]) Megan M.

Family Name
or Surname Runk

Inventor's
Signature

Date

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State OH

Country USA

Citizenship USA

Mailing Address 8920 Spooky Ridge Lane

City Cincinnati

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ZIP 45242

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NAME OF FIFTH INVENTOR

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Given Name
(first and middle [if any]) Michael H.

Family Name
or Surname Slayton

Inventor's
Signature

Date

Residence: City Tempe

State AZ

Country USA

Citizenship USA

Mailing Address 1323 E. Whalers Way

City Tempe

State AZ

ZIP 85283-2149

Country USA

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NAME OF SIXTH INVENTOR

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Peter G.

Family Name
or Surname Barthe

Inventor's
Signature

Date

Residence: City Phoenix

State AZ

Country USA

Citizenship USA

Mailing Address 4818-1 E. Hazel Drive

City Phoenix

State AZ

ZIP 85044

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(Title of the Invention)

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AND

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Mark Levy

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Address:

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City:

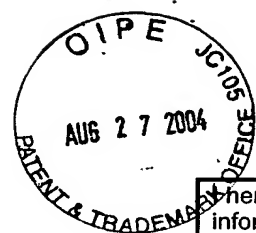
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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) T. Douglas

Family Name
or Surname Mast

Inventor's
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Date

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Waseem

Family Name
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Inventor's
Signature

Date

Residence: City Clifton Park

State NY

Country USA

Citizenship Jordan

Mailing Address 702 Solomon Avenue

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State NY

ZIP 12065

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Inder Raj S.

Family Name
or Surname Makin

Inventor's
Signature

Inder Raj S. Makin

Date

August 13, 2004

Residence: City Loveland

State OH

Country USA

Citizenship USA

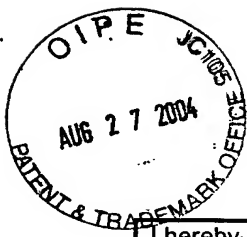
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Attorney Docket Number
END-5314

First Named Inventor
T. Douglas Mast

COMPLETE IF KNOWN

Application Number
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Group Art Unit
3737

Examiner Name

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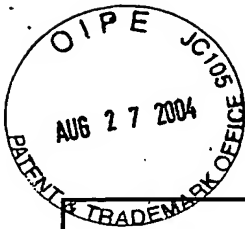
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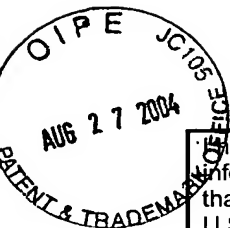
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Given Name
(first and middle [if any]) T. Douglas

Family Name
or Surname Mast

Inventor's
Signature

Date

August 16, 2004

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 3907 Lansdowne Avenue

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State OH

ZIP 45236

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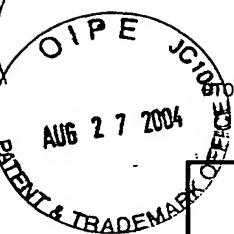
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ZIP 85044

Country USA



10/Please type a plus sign (+) inside this box
PTO/SB/01 (10-00)



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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR	Attorney Docket Number	END-5314			
	First Named Inventor	T. Douglas Mast			
	COMPLETE IF KNOWN				
	Application Number	10/825,090			
	Filing Date	April 15, 2004			
	Group Art Unit	3737			
	Examiner Name				
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: ULTRASOUND MEDICAL TREATMENT SYSTEM AND METHOD <i>(Title of the Invention)</i> the specification of which <input type="checkbox"/> is attached hereto OR <input checked="" type="checkbox"/> was filed on (MM/DD/YYYY) April 15, 2004 as United States Application Number or PCT International Application Number 10/825,090 and was amended on (MM/DD/YYYY) <input type="text"/> I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					



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Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer
Number Bar Code
Label Here

AND

☒ Practitioner(s) named below:

Name	Registration Number
Douglas Erickson,	29, 530
Mark Levy	27, 922

C/O Thompson Hine, LLP
2900 Courthouse Plaza NE
PO Box 8801
Dayton, Ohio 45401-8801
Tel 937-443-6600

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Direct all correspondence to: ☒ Customer Number **000027777** OR ☐ Correspondence address below

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Address:

Address:

City:

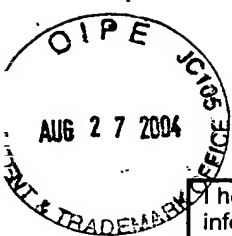
State:

ZIP

Country

Telephone:

Fax: (513) 337-8489



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) T. Douglas

Family Name
or Surname Mast

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 3907 Lansdowne Avenue

City Cincinnati

State OH

ZIP 45236

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Waseem

Family Name
or Surname Faidi

Inventor's
Signature

Date

Residence: City Clifton Park

State NY

Country USA

Citizenship Jordan

Mailing Address 702 Solomon Avenue

City Clifton Park

State NY

ZIP 12065

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Inder Raj S.

Family Name
or Surname Makin

Inventor's
Signature

Date

Residence: City Loveland

State OH

Country USA

Citizenship USA

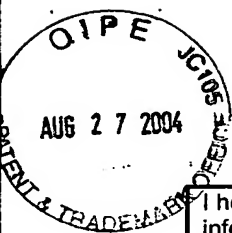
Mailing Address 11388 Donwiddle Drive

City Loveland

State OH

ZIP 45140

Country USA



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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Megan M.

Family Name
or Surname Runk

Inventor's
Signature

Megan M. Runk

Date

Aug. 16, 2004

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 8920 Spooky Ridge Lane

City Cincinnati

State OH

ZIP 45242

Country USA

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NAME OF FIFTH INVENTOR

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Michael H.

Family Name
or Surname Slayton

Inventor's
Signature

Date

Residence: City Tempe

State AZ

Country USA

Citizenship USA

Mailing Address 1323 E. Whalers Way

City Tempe

State AZ

ZIP 85283-2149

Country USA

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NAME OF SIXTH INVENTOR

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Peter G.

Family Name
or Surname Barthe

Inventor's
Signature

Date

Residence: City Phoenix

State AZ

Country USA

Citizenship USA

Mailing Address 4818-1 E. Hazel Drive

City Phoenix

State AZ

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		Application Number	10/825,090	
		Filing Date	April 15, 2004	
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		Examiner Name		
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AND

☒ Practitioner(s) named below:

Name
Douglas Erickson,
Mark Levy

Registration Number
29, 530
27, 922

C/O Thompson Hine, LLP
2900 Courthouse Plaza NE
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Name:

Address:

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City:

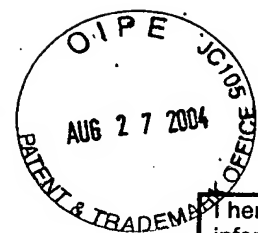
State:

ZIP

Country

Telephone:

Fax: (513) 337-8489



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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) T. Douglas

Family Name
or Surname Mast

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 3907 Lansdowne Avenue

City Cincinnati

State OH

ZIP 45236

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Waseem

Family Name
or Surname Faidi

Inventor's
Signature

Date

Residence: City Clifton Park

State NY

Country USA

Citizenship Jordan

Mailing Address 702 Solomon Avenue

City Clifton Park

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ZIP 12065

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Inder Raj S.

Family Name
or Surname Makin

Inventor's
Signature

Date

Residence: City Loveland

State OH

Country USA

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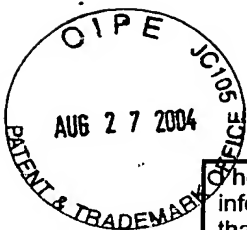
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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Megan M.

Family Name
or Surname Runk

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

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NAME OF FIFTH INVENTOR

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Given Name
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Inventor's
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Label Here

AND

☒ Practitioner(s) named below:

Name

Douglas Erickson,
Mark Levy

Registration Number

29, 530
27, 922

C/O Thompson Hine, LLP
2900 Courthouse Plaza NE
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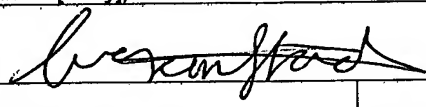
ZIP



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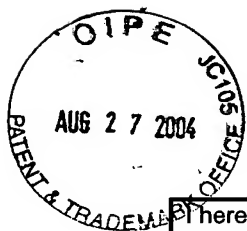
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) T. Douglas		Family Name or Surname Mast	
Inventor's Signature		Date	
Residence: City Cincinnati	State OH	Country USA	Citizenship USA
Mailing Address 3907 Lansdowne Avenue			
City Cincinnati	State OH	ZIP 45236	Country USA

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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Waseem		Family Name or Surname Faidi	
Inventor's Signature 		Date 8/12/04	
Residence: City Clifton Park	State NY	Country USA	Citizenship Jordan
Mailing Address 702 Solomon Avenue			
City Clifton Park	State NY	ZIP 12065	Country USA

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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Inder Raj S.		Family Name or Surname Makin	
Inventor's Signature		Date	
Residence: City Loveland	State OH	Country USA	Citizenship USA
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